STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY | *For Official Use*

IN THE INTEREST OF

_____
a person under the age of 18.

_____
Date of Birth

Consent to Termination of Parental Rights
(Judicial)
Indian Child Welfare Act

Case No. _____

UNDER OATH, I STATE:

1. My name is _____
   My address is _____
   My date of birth is _____

2. I am the (check one): ☐ mother. ☐ presumed father. ☐ biological (non-adjudicated) father.
   ☐ alleged father. ☐ adjudicated father.

3. My child is a member of an Indian tribe or is eligible for membership in an Indian tribe and is the biological child of a member of an Indian tribe.

4. My child is at least 11 days old.

5. The terms and consequences of signing this consent have been fully explained in detail and in my own language. I understand that a court order terminating parental rights will permanently end **ALL legal rights and duties** that exist between me and this child, such as:
   • Duty to support
   • Right to custody and visitation
   • Right to inherit

6. I wish to give up any parental rights that I may have to this child and consent to the court entering an order terminating my parental rights.

7. I give up the right to know of any future hearing or proceedings in this matter.

8. I am making this decision on my own free will. No promises or threats have been made to get me to sign this document.

9. My consent can be withdrawn for any reason at any time prior to the court's order terminating my parental rights.

Subscribed and sworn to before me
on _____

_____
Notary Public, State of Wisconsin

My commission expires: _____

_____
Signature

_____
Name Printed or Typed

_____
Date

APPROVAL OF GUARDIAN AD LITEM
(Needed for minor or incompetent parent)
I am the guardian ad litem for the above named parent who is a
☐ minor ☐ incompetent. I am familiar with the facts. I join in the consent to the termination of this person's parental rights.

_____
Signature of Guardian ad Litem

_____
Name Printed or Typed

_____
Date

CERTIFICATE OF JUDGE
I certify that I am the judge of the _____ court of _____ County, State of _____, a court of record. The above named parent appeared before me on this date. The terms and consequences of the consent to terminate parental rights were fully explained in detail and were fully understood by the parent and I therefore found this consent to be informed and voluntary before I accepted it.

_____
Signature of Circuit Court

_____
Name Printed or Typed

_____
Date

IW-1637, 04/08 Consent to Termination of Parental Rights (Judicial) - Indian Child Welfare Act   §48.41(2)(b), Wisconsin Statutes; 25 U.S.C. §1913
This form shall not be modified. It may be supplemented with additional material.
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